In the United States Patent and Trademark Office

Applicants:	Jeffrey Mark LaFortune	Docket No.:	19,457
Serial No.:	10/747,924	Group:	1771
Filed:	December 29, 2003	Examiner:	Matzek, Matthew D.
For:	SURFACE CHARGE MANIPULATION FOR IMPROVED FLUID INTAKE RATES OF ABSORBENT COMPOSITES		
Date:	April 21, 2006		

Request for Continued Examination (RCE) Transmittal under 37 CFR § 1.114

Mail Stop RCE
Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicants hereby request continued examination of the above-identified application in accordance with the provisions of 37 C.F.R. §1.114.

a. ☒ Previously submitted

   I. ☒ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on March 23, 2006.

   II. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on

   III. ☐ Other

b. ☐ Enclosed

   I. ☐ Amendment/Reply

   II. ☐ Affidavit(s)/Declaration(s)

   III. ☐ Information Disclosure Statement (IDS)

   IV. ☐ Other

Please charge the continuing examination fee of $790.00 (fee code 1801) set forth in § 1.17(e) to Kimberly-Clark Worldwide, Inc. deposit account number 11-0875.

In the event the fee indicated above is incorrect, please charge any additional fee or credit any excess in the fee to Kimberly-Clark Worldwide, Inc. deposit account number 11-0875.

Please address all correspondence to: Bryan R. Rosiejka, Kimberly-Clark Worldwide, Inc., 401 North Lake Street, Neenah, Wisconsin 54957-0349.

K-C Docket No.: 19,457
Serial No.: 10/747,924

The undersigned may be reached at telephone number (920) 721-4405 or fax number (920) 721-0279.

Respectfully submitted,

JEFFREY MARK LAFORTUNE

By: _____
    Bryan R. Rosiejka
    Registration No.: 55,583

CERTIFICATE OF TRANSMISSION

I, Bryan R. Rosiejka, hereby certify that on April 24, 2006 this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. (571) 273-8300.

Typed or printed name of person signing this certificate:

_____ Bryan R. Rosiejka _____

Signature:

_____

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